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PTO/SB/01 (10-01)

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Attorney Docket Number 2021-045 **DECLARATION FOR UTILITY OR First Named Inventor** Jack D. McNeal **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date January 30, 2002 Declaration Declaration Submitted after Initial OR Submitted Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial

Filing	required)	Examiner Name		
As the below named inventor, I here	by declare that:			
My residence, mailing address, and cit		w next to my name.		
I believe I am the original and first inve			ch a patent is soug	ht on the invention entitled:
SAMPLE LEVEL DETE				
	(Title of the Ir	nvoction)		
the specification of which	(True Of the III	ivenuony		
X is attached hereto				
OR F				
was filed on (MM/DD/YYYY)		as United States A	pplication Number	or PCT International
L				
Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).
I hereby state that I have reviewed and any amendment specifically referred to	d understand the contents on above.	of the above identified speci	fication, including t	he claims, as amended by
I acknowledge the duty to disclose info	ormation which is material to th became available betwee	patentability as defined in in the filing date of the prior	37 CFR 1.56, incluapplication and the	uding for continuation-in-part e national or PCT
International filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
Number(s)	Journal	(MIMIDDITITI)		
Additional foreign application nu	mbers are listed on a supple	emental priority data sheet	PTO/SB/02B attac	hed hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: X Customer Num or Bar Code La	1 //4/1	OR Co	πespondence address below	
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City		State	ZIP	
Country	elephone		Fax	
I hereby declare that all statements made herein of m are believed to be true; and further that these statem made are punishable by fine or imprisonment, or both validity of the application or any patent issued thereon.	ents were made wit , under 18 U.S.C. 10	h the knowledge that willful fals	e statements and the like so	
NAME OF SOLE OR FIRST INVENTOR:	A petition I	nas been filed for this unsig	gned inventor	
Given Name (first and middle [if any]) Jack D.	1	Family Name or Surname Mc_ Ne	al	
Inventor's Signature July W. Me h	ul		Date /29/03	
			702	
Residence: City Long Beach	State CA	Country US	Citizenship US	
Residence: City Long Beach	State Off	Country	Gidzensinp -	
Mailing Address 172 Cordova Walk				
City Long Beach	State CA	ZIP 90803	Country US	
NAME OF SECOND INVENTOR:	A petition ha	s been filed for this unsign	ed inventor	
NAME OF CEGORD INVENTOR.		l		
Given Name (first and middle [if any]) Yagang		Family Name Liu		
Inventor's Signature			Date 1/29/02	
Residence: City Irvine	State CA	Country US	Citizenship China	
, tooluoitoo, oity	1000	Jounna	1	
Mailing Address 41 Santa Victoria	Isle			
City Irvine	State CA	ZIP 92606	Country US	
Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

Please type a plus sign (+) inside this box	X
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1__ of 1__

Name of Additional Joint Inventor, if a	ıy:	A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname			
Mary S.		Ad	zich.			
Inventor's Adag on Mary S. X.			ch		1-29-02 Date	
Residence: City Yorba Linda	State CA	c	Country US	c	itizenship US	
Mailing Address 4722 Ohio Street	<u> </u>					
Mailing Address						
City Yorba Linda	State CA		zip 92886 c	ountry	, US	
Name of Additional Joint Inventor, if ar	ıy:		A petition has been filed	for this	unsigned inventor	
Given Name (first and middle [if any])	Family Name or Surname				
Inventor's Signature					Date	
Residence: City State		Country Citizenship		Citizenship		
Mailing Address						
Mailing Address						
City	State		ZIP	Cour	itry	
Name of Additional Joint Inventor, if a	ny:		A petition has been filed fo	or this	unsigned inventor	
Given Name (first and middle [if any])	Family Name or Surname				
Inventor's Signature					Date	
Residence: City State		Country Citizenship		Citizenship		
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	January 30, 2002
First Named Inventor	Jack D. McNeal
Title	SAMPLE LEVEL DETECTION
Group Art Unit	SYSTEM
Examiner Name	
Attorney Docket Number	2021-045

I hereby appoint:			
Practitioners XXXX AND	at Customer Number 22471	Numba Date of Label here	
x Practitioner(s)) named below:	PATENT TRADEHARK OFFICE	
	Name	Registration Number	
Jeffr	cey G. Sheldon	27,953	
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	SIGNATURE of Applicant or Assi	signee of Record	
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First Named Inventor	Jack D. McNeal
Title	SAMPLE LEVEL DETECTION
Group Art Unit	SYSTEM
Examiner Name	
Attorney Docket Number	2021-045

I hereby appoint:				- 		h
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Practitioner(s) n	amed below:			LPr	ATENT TRADEHARK OFFICE	
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	SIGNATURE of	Applicant or Assign	ee of R	Record		
Name Jax	k D. McNeal	<u> </u>				
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Attorney Docket Number	2021-045

Practitioners at Customer Number 22471	l hereby appoi	nt:			Plac	e Customer	٦	
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Name Registration Number Jeffrey G. Sheldon 27,953		= · =					ا ل	
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number I midvidual Name Address Address Address I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTOISB196). SIGNATURE of Applicant or Assignee of Record Name Mary S. Adzich Signature J-29-0 Z NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	Practitione	· · · · · · · · · · · · · · · · · · ·		T				
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number Individual Name Address Address City State I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTOISBI96). SIGNATURE of Applicant or Assignee of Record Name Mary S, Adzich Signature Jay J. Janual Date 1-29-02 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				127		umper		
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OR Firm or Individual Name Address Address City State Zip Country Telephone Fax I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mary S, Adzich Signature Mary S. Molycicl Date 1-29-02 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					Number	r Bar Code		
Address Address City State Zip Country Telephone Fax I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mary S, Adzich Signature Mary S. Adzich Signature Jary S. Adzich Date 1-29-02 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					Label h	ere		
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Country Telephone Fax I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mary S, Adzich Signature Mary S. Adzich Signature Mary S. Adzich Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address							
Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mary S, Adzich Signature Mary S, Adzich Signature Date 1-29-02 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	City			State		Zip		
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SIGNATURE of Applicant or Assignee of Record Name Mary S, Adzich Signature Date 1-29-02 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature, see below*.	🗶 Applicant	t/Inventor.						
SIGNATURE of Applicant or Assignee of Record Name Mary S, Adzich Signature Date 1-29-02 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature, see below*.	Assignee of record of the entire interest. See 37 CFR 3.71.							
Name Mary S, Adzich Signature Mary S, Adzich Date 1-29-02 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					(96).			
Signature Mary S. Mahrick Date 1-29-02 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	SIGNATURE of Applicant or Assignee of Record							
Signature Mary S. Morrich Date 1-29-02 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name	Mary S, Adzich						
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